City of Hartford Department of Finance Assessment Division 550 Main Street Hartford, Connecticut 06103



PRESORT FIRST CLASS MAIL US POSTAGE PAID PERMIT # 2050 HARTFORD, CT

# OCTOBER 1, 2006 Declaration of Personal Property

### **Address Service Requested**

| TO:   |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|
|   |  |  |  |  |  |  |  |  |
| This is your declaration of personal property that you own in the <b>City Of Hartford</b> This is your <b>only</b> notification to file by November 1, 2006.  |  |  |  |  |  |  |  |  |
| IMPORTANT   |  |  |  |  |  |  |  |  |
| If you no longer own the business noted above, please follow the instructions on page 7.  |  |  |  |  |  |  |  |  |
| Your check-off list for filing this personal property declaration:  |  |  |  |  |  |  |  |  |
| Your check-off list for filing this personal property declaration:  Read the instructions, page 2. Complete all appropriate sections of this Declaration. Sign and date this Declaration, page 8. Make a copy of your completed Declaration. Return the entire Declaration to our office on or before November 1, 2006. |  |  |  |  |  |  |  |  |

Failing to file by November 1, 2006 will result in a 25% penalty. If you need an extension of time to file, contact our office in writing prior to November 1, 2006. An extension for good cause may be granted at the sole discretion of the Assessor.

#### Questions:

Direct questions concerning this declaration to the Assessor's office at:

Telephone: (860) 757-9646

#### Who Should File?

All persons conducting business, farmers, owners of non-registered motor vehicle(s) and non-Connecticut registered motor vehicle(s) and owners of horse(s).

#### What Should Be Declared?

All personal property used in the conduct of the business.

See below and pages 4 and 5 for specifics.

#### How to Declare:

All persons conducting business must complete  ${\bf BUSINESS\ DATA}$  page 3 and then;

#### 1. Owners of:

- Non-Connecticut registered motor vehicles complete #9 on page 4.
- b. Non-registered motor vehicles complete #9 on page 4.
- Businesses, occupations, farmers, and professionals complete:
  - Taxable Property Information, pages 4 and 5.
  - Lessee's Report, if you have any leased, borrowed, consigned, stored or rented equipment, in your possession, complete page 6.
  - Lessor's Report, if you have leased, consigned, loaned, or rented equipment to another, complete page 6.
  - Detail Listing of Disposed Assets, page 7.

#### 2. Lessors complete:

- Taxable Property Information, pages 4 and 5.
- · Lessor's Report, page 6.

LESSORS NOTE: Your contractual arrangement (i.e., conditional sale contract) with the lessee does not negate your statutory obligation to declare your leased property to the Assessor.

#### Filing Requirements:

- The Personal Property Declaration must be filed annually on or before November 1<sup>st</sup> (CGS §12-41).
- 2. All Declarations must be signed and sworn to on page 8.

#### **Taxable Property Information:**

- 1. Commercial and cost information is **not** open to public inspection.
- 2. All data reported should be:
  - Actual acquisition costs including any additional charges for transportation and installation. These costs, less the standard depreciation as shown on the form will determine the net depreciated value.
- Include all assets that may have been fully depreciated, written off, or charged to expense but are still owned.
- Reports are to be filed on an assessment year basis of October 1.
   Acquisitions between October 2 and December 31 apply to the new year. (i.e. acquisition made November 13, 2005 is reported in the year ending October 1, 2006).
- Computerized filings are acceptable as long as all information is reported in the prescribed format.
- 5. **NOTE:** In each table on pages 4 and 5, there are examples of what items should be declared in each table.

#### Disposal/Sale or Transfer of Property:

- If you disposed of or transferred a portion of the property included in last year's filing, complete the Reconciliation of Fixed Assets and the Detailed Listing of Disposed Assets on page 7.
- If you no longer own the business noted on page 1, you do not need
  to complete this declaration. You must however provide information
  related to the new owner and/or the date the business ceased (page
  7). Otherwise, the Assessor must assume that you still own taxable
  personal property and have failed to declare it. Follow the instructions
  on page 7.

#### A Penalty Of 25% is Applied:

- 1. When a declaration is not timely filed or a declaration is not signed and sworn to, a 25% penalty is applied to the total assessment.
- When declarations are submitted after November 1 and an extension has not been granted (see Extensions below), a 25% penalty is applied to the total assessment. Mailed declarations must have a U.S. postmark of November 1 or before.
- When an extension is granted (see Extensions below) and the declaration is not filed by the extension deadline, a 25% penalty is applied to the total assessment.
- 4. When omitted property is discovered, the 25% penalty is applied to the difference in the assessed value as determined by the results of the discovery, and the assessment as determined by the originally filed declaration.
- Declarations filed with "same as last year" are INSUFFICIENT and shall be considered an incomplete declaration subject to a 25% penalty.
- A Personal Property Declaration not filed will result in a value determined by the Assessor, plus a 25% penalty will be applied to the total assessment.

#### Exemptions:

- 1. On page 9, check the box next to the exemption(s) you are claiming.
- Some exemptions require an additional application in order to receive that exemption. Request the form number (if any, noted on page 9) from the Assessor's Office and file same.
- The extension to file the Personal Property Declaration, if granted, does not apply to all required exemption applications. Check with the Assessor's Office.

#### Signature Requirements:

- 1. The owner(s) must sign the declaration on page 8.
- The owner's agent may sign the declaration. However, the declaration must then be duly sworn to and notarized.
- Corporate officers signing for their corporations must have the returns properly sworn to and notarized; or provide the Assessor with a statement bearing the corporate seal and signed by the corporate secretary setting out the office held by the signer of the declaration and dates office held.

#### Extension:

The Assessor may grant a filing extension for **good cause** (CGS §12-42). If an extension is needed, contact the Assessor in writing prior to **November 1** stating the reason for the extension. The decision to grant an extension is the sole responsibility of the Assessor. There is no appeal.

#### Audit:

The Assessor is authorized to audit declarations, within 3 years of the date of the required filing. Substantial penalties are applicable if such an audit reveals property not declared as required by law (CGS §12-53)

| AN EXAMPLE OF HOW TO COMPLETE THE TABLES ON PAGES 4 AND 5  #16 Furniture, fixtures and equipment |             |  |        |                   |  |  |  |  |  |
|--|-------------|--|--------|-------------------|--|--|--|--|--|
| How Should the Following Be Declared?  | Year Ending | Original cost, transportation & installation | % Good | Depreciated Value |  |  |  |  |  |
|  | 10-1-06     | 50   | 95%    | 48                |  |  |  |  |  |
| June 2004, you bought a desk for \$300 and a chair for \$80. In October 2005,                    | 10-1-05     | 400  | 90%    | 360               |  |  |  |  |  |
| You buy a display rack for \$400. A filing cabinet you bought 10 years ago for                   | 10-1-04     | 380  | 80%    | 304               |  |  |  |  |  |
| \$100 for personal use, is now being used in your business. A friend gives                       | 10-1-03     |  | 70%    |                   |  |  |  |  |  |
| You a used bookcase, in February 2006, which you believe, is worth \$50.                         | 10-1-02     |  | 60%    |                   |  |  |  |  |  |
|  | 10-1-01     |  | 50%    |                   |  |  |  |  |  |
| See The Table To The Right For The Answer  | 10-1-00     |  | 40%    |                   |  |  |  |  |  |
| -  | PRIOR YRS   | 100  | 30%    | 30                |  |  |  |  |  |
|  | Total       | 930  | Total  | 742               |  |  |  |  |  |

## PERSONAL PROPERTY DECLARATION

COMMERCIAL AND FINANCIAL INFORMATION IS NOT OPEN TO PUBLIC INSPECTION.

| LEGAL NAME_ Under which business is beir  | ng conducted. <u>NOTE</u> : A tra   | de name is not a legal name.  |  |             |         |          |       |  |
|---|---|---|--|-------------|---------|----------|-------|--|
| DBA(S)  |   |   |  |             |         |          |       |  |
| STREET LOCATION_  |   |   |  |             |         |          |       |  |
| MAILING<br>ADDRESS  | STREET NAME AND NUM   | MBER, OR PO BOX NUMBER  | TOWN                                   | STATE       |         | ZIP CODE |       |  |
|   | OTREET NAME AND NOW   | VIDER, OR TO BOX NOWBER   | TOWN                                   | OTATE       |         | 211 0001 |       |  |
| J   | BUSINESS DATA for   | r businesses, occupations,  | professions, farmers, an               | ıd lessors. |         |          |       |  |
|   | DIRECT QUESTION   | S TO:   | LOCATION OF ACC                        | OUNTING R   | ECORDS: |          |       |  |
| Company's Name  |   |   |  |             |         |          |       |  |
| City/State/Zip Phone / Fax (  | )   | ( )   | ( )                                    | (           | )       |          |       |  |
|   |   | /   |  | 1           |         |          |       |  |
| How many employees wo   | rk at this location?  | his location?   | Date your business began Sq. ft. Owned |             |         |          |       |  |
| Tiow many square leet do  | es your min occupy at the   | TIIS IOCATION!  | Sq. it. Owned                          | Leased      |         |          |       |  |
| TYPE OF OWNERSHIP: PLEASE ANSWER THE FOLLOWING:   |   |   |  |             |         |          | No    |  |
| ☐ Sole proprietor☐ Corporation☐ Other-describe  | ☐ LLC<br>☐ Partnership  | In the last 12 months was any of the property included in this declaration located in another Connecticut town for at least 3 month? If yes, identify by specific months, code, cost, location(s) to an <b>attached sheet</b> . |  |             |         |          |       |  |
| TVPE OF   | Are there any other businesses operating from <u>your address</u> here in Hartford? If yes, list name and mailing address (if different) on <b>attached sheet</b> . |   |  |             |         |          |       |  |
| ☐ Manufacturer ☐ Service ☐ Retail/Mercantile ☐ Lessor ☐ Other-Describe                          | ☐ Wholesale ☐ Profession ☐ Tradesman  | Does the business or businesses listed on your <b>attached sheet</b> have any personal property <b>not</b> included in this declaration? If yes, include on <b>attached sheet</b> .   |  |             |         |          |       |  |
|   | K THE BOY NEXT  | <u> </u><br>TO ANY EXEMPTION Y  | OLLARE CLAIMING                        |             | Assesso | or's Use | Only  |  |
| On Eo   | N THE BOX NEXT  | TO AIT! EXEMIT HOIT!  | OO ARE OLAIMING                        |             |         |          | ·,    |  |
| □Mechanic's Tools   | (I): \$500 exemption  |   |  |             | Code    | Exemp    | otion |  |
|   | ., .  |   |  |             |         |          |       |  |
|   |   |   |  |             |         |          |       |  |
| CERT  | IFICATE TO BE FILED   | TIONS REQUIRE A SEPARA<br>WITH THE ASSESSOR BY I  | NOVEMBER 1, 2006.                      |             |         |          |       |  |
|   | ·   | uipment (J): must provide a co  |  |             |         |          |       |  |
| ☐ Distressed Munici   | pality/Enterprise Zone/E  | Enterprise Corridor Zone (G+F   | I): Exemption application M            | -55         |         |          |       |  |
| □ New manufacturing machinery and equipment; Code #13 on page 4 (N): Exemption application M-65 |   |   |  |             |         |          |       |  |

#### TAXABLE PROPERTY INFORMATION

#### 1. All data reported should be:

- Actual acquisition costs including any additional charges for transportation and installation. These costs, less the standard depreciation as shown on the form will determine the net depreciated value.
- Include all assets that may have been fully depreciated, written off, or charged to expense but are still owned.
- Reports are to be filed on an assessment year basis of October 1.
   Acquisitions between October 2 and December 31 apply to the new year.
   (i.e. acquisition made November 13, 2005 is reported in the year ending October 1, 2006).
- Computerized filings are acceptable as long as all information is reported in the prescribed format.

| <b>#9 Motor vehicles</b> Unregistered motor vehicles (e.g. campers, RV's, snowmobiles, trailers, trucks, passenger cars, tractors, off-road construction vehicles, etc.) including any vehicle garaged in Connecticut but registered in another state, or any such vehicle not registered at all. If you are a farmer eligible for the exemption under Sec. 12-91, list tractors in Code 17. If more than three, copy and attach additional sheets. |      |       |                    |        |        |                |      |       |      | Assessor's<br>Use Only |
|---|------|-------|--------------------|--------|--------|----------------|------|-------|------|------------------------|
| Year  | Make | Model | Identification No. | Length | Weight | Purchase Price | Date | Value | Code |                        |
|   |      |       |                    |        |        |                |      |       | #9   |                        |
|   |      |       |                    |        |        |                |      |       | #9   | 1                      |
|   |      |       |                    |        |        |                |      |       | #9   |                        |

# \* PLEASE SEE INSTRUCTIONS & SUPPLEMENTAL FORM M-65 INSERT BEFORE COMPLETING THIS SECTION.

**Note:** Declarations filed with "see attached list" must have a list that clearly segregates the personal property by year acquired and type, otherwise the declaration will be considered incomplete.

#### #10 - Machinery & equipment

To claim this type of property complete the:
Supplemental Form For Manufacturing And
Biotechnology Machinery And Equipment Only
and enter total depreciated value on the
Summary Sheet page inserted in this Personal
Property Declaration.

#### #13 - Newly acquired mfg. machinery & equipment

To claim this type of property complete both the:
Supplemental Form For Manufacturing And Biotechnology
Machinery And Equipment and the Manufacturing
Machinery And Equipment Exemption Claim M-65 and
enter total depreciated value on the Summary Sheet page
inserted in this Personal Property Declaration.

To report Codes #10, #13, #15a or #15b use the Supplemental Form

#### #15a – Manufacturing Machinery/Equipment Eligible For Tax Relief Under Public Act 06-83

#15b – <u>Biotechnology</u> Machinery/Equipment Eligible For Tax Relief Under Public Act 06-83

To claim this type of property complete the; <u>Supplemental Form For Manufacturing And Biotechnology Machinery And Equipment **Only** and enter total depreciated value on the Summary Sheet page inserted in this Personal Property Declaration.</u>

**#16 Furniture, fixtures and equipment** Furniture, fixtures and equipment of all commercial, industrial, manufacturing, mercantile, trading and all other businesses, occupations and professions. Examples: desks, chairs, tables, file cabinets, typewriters, calculators, telephone answering machines, postage meters, cash registers, moveable air conditioners, partitions, shelving display racks, refrigerators, freezers, kitchen equipment, etc.

| Year<br>Ending | Original cost, trans-<br>portation & installation | %<br>Good | Depreciated Value |
|----------------|---|-----------|-------------------|
| 10-1-06        |   | 95%       |                   |
| 10-1-05        |   | 90%       |                   |
| 10-1-04        |   | 80%       |                   |
| 10-1-03        |   | 70%       |                   |
| 10-1-02        |   | 60%       |                   |
| 10-1-01        |   | 50%       |                   |
| 10-1-00        |   | 40%       |                   |
| PRIOR YRS      |   | 30%       |                   |
| Total          |   | Total     |                   |

#16a Telephone systems, copiers/duplicators & facsimile machines Excluding furniture, fixtures and equipment of all commercial, industrial, manufacturing, mercantile, trading and all other businesses, occupations and professions. Examples: desks, chairs, tables, file cabinets, typewriters, calculators, telephone answering machines, postage meters, cash registers, moveable air conditioners, partitions, shelving display racks, refrigerators, freezers, kitchen equipment, etc.

| Year<br>Ending | Original cost, trans-<br>portation & installation | % Good | Depreciated Value |
|----------------|---|--------|-------------------|
| 10-1-06        |   | 95%    |                   |
| 10-1-05        |   | 80%    |                   |
| 10-1-04        |   | 60%    |                   |
| 10-1-03        |   | 40%    |                   |
| PRIOR YRS      |   | 20%    |                   |
| Total          |   | Total  |                   |
|                |   |        |                   |

#16 | #16a

**#19 Mechanics Tools** Mechanics tools (e.g., wrenches, air hammers, jacks, sockets, screwdriver, etc.).

**#20 Electronic data processing equipment** (e.g., computers, printers, peripheral computer equipment and any computer based equipment acting as a computer as defined under Section 168 of the IRS Code of 1986.). Bundled software is taxable and must be included.

Assessor's Use Only

| Ending   | Original cost, trans-  | %  |  | Year  | Original cost, trans-   | %   |                        |     |
|--|--|--|--|---|---|---|------------------------|-----|
| Ending   | portation & installation   | Good   | Depreciated Value  | Ending  | portation & installation  | Good  | Depreciated Value      |     |
| 10-1-06  |  | 95%  |  | 10-1-06   |   | 95%   |                        |     |
| 10-1-05  |  | 90%  |  | 10-1-05   |   | 80%   |                        |     |
| 10-1-04  |  | 80%  |  | 10-1-04   |   | 60%   |                        |     |
| 10-1-03<br>10-1-02   |  | 70%<br>60%   |  | 10-1-03<br>Prior Yrs  |   | 40%<br>20%  |                        |     |
| 10-1-02  |  | 50%  |  | Total   |   | Total   |                        |     |
| 10-1-00  |  | 40%  |  | rotai   |   | Total   |                        | #19 |
| Prior Yrs  |  | 30%  |  |   | COMPUT  | FERS  |                        |     |
| Total  |  | Total  |  |   | COME  | LIND  |                        | #20 |
| Year Ending 10-1-06 10-1-05 10-1-03 PRIORYRS Total EXCLUDIN conduits,  | unications controllers & cog equipment and/or telecogically advanced by the Asse  Original cost, transportation & installation  IG furniture, fixtures, antennae, towers, battet NOT deemed technologic  | % Good 95% 80% 60% 40% 20% Total computeries, ge               | Depreciated Value  er equipment, cables, enerators, or any other   |   |   |   |                        | #21 |
| mains, water an mains, wir water pow hydraulic cwell as pro  | oles, conduits, pipes, wires, etc., of gas, head water power compares, etc., of gas, heating, ver companies. Include it car lifts, gasoline holding to operty used for the purpose e.g., pumping stations).  | ating, te<br>anies. Po<br>telephon<br>ems anne<br>anks, pum    | elephone companies,<br>oles, towers, underground<br>ne companies, water and<br>exed to the ground (e.g.,<br>nps, truck scales, etc.), as | Year<br>Ending<br>10-1-06<br>10-1-05<br>10-1-04<br>10-1-03  | Original cost, transportation & installation  | %<br>Good<br>%<br>%<br>%                              | Depreciated Value      |     |
| Ji water (e  | e.g., pumping stations).   |  |  | 10-1-02   |   | %   |                        |     |
| DE   | OLIC regulated utiliti   | oo obo   | ak this box $\square$  | 10-1-01   |   | %   |                        |     |
| DF   | PUC regulated utiliti  | es che   | CK IIIS DOX L  | 10-1-00   |   | %   |                        |     |
|  |  |  |  | PRIOR YRS   |   | %   |                        |     |
|  |  |  |  | Total   |   | Total   |                        | #22 |
| supplies n<br>post-it not  | Expensed Supplies Theormally consumed in the cotes, typewriter ribbons, comulers, staplers, paper clips, nce supplies, etc.) Any supplies to considered inventory and the considered inventory | ourse of b<br>puter disk<br>, medical<br>pply incor            | business (e.g., stationery, ks, computer paper, pens, and dental supplies and reporated into a "for sale"                                | the previo  | Total Expended  age is the total amount expus assessment year divide in the previous assessment | ed by the   | number of months in    | #23 |
| maintenar  |  |  |  |   |   |   |                        |     |
| maintenar<br>item shall  |  |  |  |   |   |   |                        |     |
| maintenar<br>item shall<br>#24 – All<br>any of the<br>easehold i   | e other categories (e.g. vide  | eo tapes,<br>ealty, carp                                       | ect Any other taxable persor<br>vending machines, pinball<br>venter's tools etc.). [Describe<br>ect (except video tapes)                 | games, vide   |   |   |                        |     |
| #24 – All<br>any of the<br>leasehold if<br>#24 – All<br>Year<br>Ending   | e other categories (e.g. vide improvements other than re   | eo tapes,<br>ealty, carp<br>and effe<br>%<br>Good              | vending machines, pinball penter's tools etc.). [Describe  | games, video<br>briefly   | o games, signs, billboards  | %<br>Good   |                        |     |
| #24 - All<br>any of the<br>leasehold i<br>#24 - All<br>Year<br>Ending<br>10-1-06   | e other categories (e.g. vide<br>improvements other than re<br>other goods, chattels<br>Original cost, trans-  | eo tapes,<br>ealty, carp<br>and effe<br>%<br>Good<br>95%       | vending machines, pinball<br>penter's tools etc.). [Describe<br>ect (except video tapes)   | games, video briefly #24a - Ro Year Ending 10-1-06  | ental video tapes  Original cost, trans-  | %<br>Good<br>95%                                      | makers, water coolers, |     |
| #24 – All<br>any of the<br>easehold in<br>#24 – All<br>Year<br>Ending<br>10-1-06<br>10-1-05                                    | e other categories (e.g. vide<br>improvements other than re<br>other goods, chattels<br>Original cost, trans-  | eo tapes,<br>ealty, carp<br>and effe<br>%<br>Good              | vending machines, pinball<br>penter's tools etc.). [Describe<br>ect (except video tapes)   | games, video<br>briefly   | ental video tapes  Original cost, trans-  | %<br>Good   | makers, water coolers, |     |
| #24 – All any of the easehold if Year Ending 10-1-06 10-1-05 10-1-04   | e other categories (e.g. vide<br>improvements other than re<br>other goods, chattels<br>Original cost, trans-  | eo tapes, ealty, carp and effe % Good 95% 90%                  | vending machines, pinball<br>penter's tools etc.). [Describe<br>ect (except video tapes)   | games, video<br>briefly<br>#24a – Ro<br>Year<br>Ending<br>10-1-06<br>10-1-05                                    | ental video tapes  Original cost, trans-  | %<br>Good<br>95%<br>80%                               | makers, water coolers, |     |
| #24 – AII any of the leasehold if #24 – AII Year Ending 10-1-06 10-1-05 10-1-04 10-1-03  | e other categories (e.g. vide<br>improvements other than re<br>other goods, chattels<br>Original cost, trans-  | eo tapes, ealty, carp and effe % Good 95% 90% 80%              | vending machines, pinball<br>penter's tools etc.). [Describe<br>ect (except video tapes)   | year<br>Ending<br>10-1-06<br>10-1-04  | ental video tapes  Original cost, transportation & installation                                 | %<br>Good<br>95%<br>80%<br>60%                        | makers, water coolers, |     |
| maintenar<br>item shall<br>#24 – All<br>any of the<br>easehold i<br>#24 – All<br>Year  | e other categories (e.g. vide<br>improvements other than re<br>other goods, chattels<br>Original cost, trans-  | eo tapes, ealty, carp and effe  % Good 95% 90% 80%             | vending machines, pinball<br>penter's tools etc.). [Describe<br>ect (except video tapes)   | year<br>Ending<br>10-1-06<br>10-1-04<br>10-1-03   | ental video tapes  Original cost, transportation & installation                                 | %<br>Good<br>95%<br>80%<br>60%<br>40%                 | makers, water coolers, |     |
| #24 – AII any of the easehold if #24 – AII Year Ending 10-1-06 10-1-05 10-1-03 10-1-02   | e other categories (e.g. vide<br>improvements other than re<br>other goods, chattels<br>Original cost, trans-  | eo tapes, ealty, carp and effe % Good 95% 90% 80% 70%          | vending machines, pinball<br>penter's tools etc.). [Describe<br>ect (except video tapes)   | year<br>Ending<br>10-1-05<br>10-1-03<br>PRIOR YRS   | ental video tapes  Original cost, transportation & installation                                 | %<br>Good<br>95%<br>80%<br>60%<br>40%<br>20%          | makers, water coolers, | #24 |
| reaintenarritem shall  #24 – All any of the easehold in #24 – All  Year Ending 10-1-06 10-1-05 10-1-04 10-1-03 10-1-02 10-1-01 | other categories (e.g. vide improvements other than relection of the control of the control other goods, chattels  Original cost, transportation & installation  | eo tapes, ealty, carpy and effe % Good 95% 90% 80% 70% 60% 50% | vending machines, pinball<br>penter's tools etc.). [Describe<br>ect (except video tapes)   | games, vider<br>briefly<br>#24a – Re<br>Year<br>Ending<br>10-1-06<br>10-1-05<br>10-1-04<br>10-1-03<br>PRIOR YRS | ental video tapes  Original cost, transportation & installation                                 | %<br>Good<br>95%<br>80%<br>60%<br>40%<br>20%<br>Total | Depreciated Value      | #24 |

COPY AND ATTACH ADDITIONAL SHEETS IF NEEDED.

| Lessee #2 Lessee #3 | Lessee #1 | Lessee #2 | Lessee #3 |
|---------------------|-----------|-----------|-----------|
|---------------------|-----------|-----------|-----------|

|  | Г   |               |                             |                |                 |                              |                          |                 |                     |                                |
|--|---|---------------|-----------------------------|----------------|-----------------|------------------------------|--------------------------|-----------------|---------------------|--------------------------------|
| Name of Le   | essee   |               |                             |                |                 |                              |                          |                 |                     |                                |
| Lessee's ad  | ddress  |               |                             |                |                 |                              |                          |                 |                     |                                |
| Physical loc   | cation of equipment   |               |                             |                |                 |                              |                          |                 |                     |                                |
| Full equipm  | ent description   |               |                             |                |                 |                              |                          |                 |                     |                                |
| Is equipmer  | nt self manufactured  |               |                             |                |                 |                              |                          |                 |                     |                                |
| Acquisition  | date  |               |                             |                |                 |                              |                          |                 |                     |                                |
| lease signin   | <u> </u>  |               |                             |                |                 |                              |                          |                 |                     |                                |
| assumed or   |   | Yes D         | <b>Л</b>                    | o 🗆            | Yes D           | ]                            | No □                     | Yes             | 1 D                 | No 🗆                           |
| If yes, spe  | cify from whom  |               |                             |                |                 |                              |                          |                 |                     |                                |
|  | h purchase, etc.  |               |                             |                |                 |                              |                          |                 |                     |                                |
|  | sset cost was changed by tion, give details.  |               |                             |                |                 |                              |                          |                 |                     |                                |
| Type of leas   |   | ☐ Operating   | □Capital □Con               | nditional Sale | ☐ Operating     | □Capital □                   | Conditional Sal          | e 🛮 Opera       | ting □Capital □Co   | onditional Sale                |
| Lease Term Monthly cor   | n: Begin and end dates  |               |                             |                |                 |                              |                          |                 |                     |                                |
| Monthly ma   | intenance costs if included payment above   |               |                             |                |                 |                              |                          |                 |                     |                                |
| Lessor's or  | nt declared on either the the Lessee's new  | Yes □<br>No □ | Lessor D L                  | essee 🗆        |                 | Lessor $\square$             | Lessee C                 | Yes □           | Lessor              | Lessee $\square$               |
| manulaciun   | ing exemption application?  | 140 🗖         |                             |                | No 🗆            |                              |                          | 140 🗖           |                     |                                |
| LESSEE'S REPORT (Lessee: One who leases from another but for purposes of this report, also include <b>all</b> leased, borrowed, consigned, loaned, rented or stored items in your possession.)  Pursuant to Connecticut General Statutes §12-57a, all leased, borrowed, consigned, loaned, rented, or stored personal property not owned by you but in your possession as of the assessment date must be included on this form. Failure to declare, in the form and manner as herein prescribed, shall result in the presumption of ownership and subsequent tax liability plus penalties. Property you do not lease that may be in your possession and must be reported includes (but is not limited to) dumpsters, gas/propane tanks, vending machines, water coolers, coffee machines, display stands or cases, display coolers or refrigerators etc. |   |               |                             |                |                 |                              |                          |                 |                     |                                |
| Yes No   | Did you dispose of any leas<br>last October 1? If yes, ente<br>of disposition in the space to | r a descripti | on of the proper            | rty and the d  |                 |                              |                          |                 |                     |                                |
|  | Did you acquire any of the leas of last October 1? If yes, date(s) acquired in the space      | indicate pre  | evious lessor, ite          | em(s) and      | on              |                              |                          |                 |                     |                                |
|  | IMPORTANT Is the cost of a Included' column and list co                                       |               |                             |                | ared on page    | 4 or 5 of this               | declaration?             | ? If yes, not   | e year in the 'Yea  | ar                             |
|  |   |               | CORY AND                    | ATTACH AF      | DITIONAL        | SHEETS IF N                  | IEEDED                   |                 |                     |                                |
|  |   |               | OOI I AND                   | ATTACH AL      | - DITIONAL      |                              |                          |                 |                     |                                |
| Number   | Owners Name and MAILING ADDRESS   |               | n Description/<br>Model No. | Serial #       | Year of<br>Mfg. | Capital<br>Lease<br>(Yes/No) | Lease<br>Term<br>Beg/End | Monthly<br>Rent | Acquisition<br>Cost | Year<br>included<br>on pg. 4-5 |
|  |   |               |                             |                |                 |                              |                          |                 |                     |                                |
|  |   |               |                             |                |                 |                              |                          |                 |                     |                                |
|  |   |               |                             |                |                 |                              |                          |                 |                     |                                |
|  |   |               |                             |                |                 |                              |                          |                 |                     |                                |
|  |   |               |                             |                |                 |                              |                          |                 |                     | 1                              |

#### **BUSINESS CLOSING OR SALE OF BUSINESS**

If you no longer own the business noted on page 1, you do not need to complete this entire Declaration. **However**, you must **complete**, **sign** and **return** the affidavit below, **with supporting documentation** to the Assessor no later than November 1, 2006.

| Business owners name Business name (if applicable) Street location of business name is street location of business name is Said business was (indicate by circling and Date  A: SOLD TO:  Name Address (including street number, state and Street number)  Name Address (including street number, state and Street number)  Attach Bill of Sale or Letter of Dissolution to this form and return with this affidavit to the Assessor The signer is made aware that the penalty for making a false affidavit is a \$500.00 fine or imprisonment for one year or X | A or B): d zip code) |
|--|----------------------|
| A: SOLD TO:  Name  Address (including street number, state and address)  Attach Bill of Sale or Letter of Dissolution to this form and return with this affidavit to the Assessor  The signer is made aware that the penalty for making a false affidavit is a \$500.00 fine or imprisonment for one year or   | d zip code)          |
| Name  Address (including street number, state and Address (including street number, state and Address (including street number, state and B: TERMINATED:  Attach Bill of Sale or Letter of Dissolution to this form and return with this affidavit to the Assessor.  The signer is made aware that the penalty for making a false affidavit is a \$500.00 fine or imprisonment for one year or   | 's office.           |
| B: TERMINATED: Attach Bill of Sale or Letter of Dissolution to this form and return with this affidavit to the Assessor  The signer is made aware that the penalty for making a false affidavit is a \$500.00 fine or imprisonment for one year or   | 's office.           |
| The signer is made aware that the penalty for making a false affidavit is a \$500.00 fine or imprisonment for one year or  |                      |
|  | both.                |
| <b>~</b>   |                      |
| Y  |                      |
| Signature Print name   |                      |
|  |                      |
| COPY AND ATTACH ADDITIONAL SHEETS IF NEEDED.   |                      |
| Date Removed Description of Item Date Acquired Acq   | uisition Cos         |
| Date Removed Description of Item Date Acquired Acq   | uisition Cos         |
|  |                      |
|  |                      |
|  |                      |
|  |                      |
|  |                      |
|  |                      |
|  |                      |
|  |                      |
|  |                      |
|  |                      |

# **HARTFORD**

PERSONAL PROPERTY DECLARATION

Assets declared this year

Capitalization Threshold\*\*

Amount of equipment expensed last year \_

**UCTOBER 1, 2006** 

TO BE FILED BY NOVEMBER 1, 2006

Complete the Detail Listing Of Disposed Assets above
 Dollar amount at which an expenditure is posted as an asset instead of an expense

| LEGAL NAMEUnder which business is being or                                | conduct      | ed. <u>NOTE</u> : A | trade      | name is not a legal                            | name.                   |           |                                |                |                         |
|---|--------------|---------------------|------------|--|-------------------------|-----------|--------------------------------|----------------|-------------------------|
| DBA(S)  |              |                     |            |  |                         |           |                                |                |                         |
| STREET LOCATION: [in Ha   | artford.     | include str         | et nu      | mberl  |                         |           |                                |                |                         |
| •   | ,            |                     |            | 1  |                         |           |                                |                |                         |
| MAILING ADDRESSSTRE   | ET NAM       | IE AND NUME         | SER, OF    | R PO BOX NUMBER                                | 7                       | TOWN      | STATE                          |                | ZIP CODE                |
| Net Depreciated Value<br>From pages 4 & 5                                 |              |                     |            | Property Cod                                   | des and Descri          | ption     | s                              |                | Assessor's<br>Use Only  |
|   | # 9          | Unregistere         | d Moto     | or Vehicles                                    |                         |           |                                | # 9            |                         |
|   | #10          | Machinery           | & Equi     | oment  |                         |           |                                | #10            |                         |
|   | #13          | Newly Acqu          | ired M     | anufacturing Machir                            | nery & Equipment        |           |                                | #13            | l                       |
|   | #15a         | Manufactur          | ing Ma     | chinery & Equipmer                             | #15a                    | l         |                                |                |                         |
|   | #15b         | Biotechnolo         | gy Ma      | chinery & Equipmer                             | #15b                    | ļ         |                                |                |                         |
|   | #16          | Furniture &         | Fixture    | es .   | #16                     | ļ         |                                |                |                         |
|   | #16a         |                     |            | ns/ Copiers/ Fax                               |                         |           |                                | #16a           |                         |
|   | #19          | Mechanics           |            |  |                         |           |                                | #19            |                         |
|   | #20          |                     |            | ocessing Equipmen                              | nt                      |           |                                | #20            |                         |
|   | #21          |                     |            | ons Equipment                                  | #21                     |           |                                |                |                         |
|   | #22          |                     |            | pipes, poles, towers                           | #22                     |           |                                |                |                         |
|   | #23          | Average Su          | -          |  | #23                     |           |                                |                |                         |
|   | #24          | All Other G         | oods, C    | Chattels, and effect                           |                         |           |                                | #24            |                         |
|   |              |                     |            |  |                         |           |                                |                |                         |
|   |              |                     |            | Assessor                                       | 's Use Only             |           |                                |                |                         |
| Total Gross Assessment:   | all cod      | des #9 thro         | ugh #2     |  | o oco omy               |           | Total Gross Ass                | sessment       |                         |
| Penalty: descriptions on pa   | age 3        | REASON(             | S) FO      | R PENALTY:                                     |                         |           | + Penalty                      |                |                         |
|   | Ü            | `                   |            | I  |                         |           |                                |                |                         |
| Exemption(s) granted:   |              |                     |            |  |                         |           | - Total Exemption              | ı(s)           |                         |
| Total Net Assessment  |              |                     |            |  | 1                       |           | = Total Net Asses              | sment          |                         |
|   |              |                     |            | Γ  |                         |           |                                |                |                         |
|   |              |                     |            | THIS FORM N                                    | MUST BE SIGNI           | ED        |                                |                |                         |
|   |              | (and                | in som     | e cases witnessed l                            | before it may be file   | ed with t | the Assessor                   |                |                         |
| <b>AFFIDAVIT</b>  |              | (4                  |            |  | 20.0.0 ita, 200         |           |                                | Αſ             | FFIDAVIT                |
| Av  | oid Pe       | nalty, Have         | The Pe     | rsonal Property De                             | eclaration Which Is     | s Signe   | ed By An Agent Notari          | zed.           |                         |
| I DO HEREBY declare under pena  | ilty of fals | se statement th     | at the f   | oregoing list, according                       | g to the best of my kno | owledge,  | , remembrance and belief, i    | s a true state | ment of all my property |
| liable to taxation. I also declare und assessment and collection of taxes |              |                     | ement t    | nat I have not conveye                         | ed or temporarily dispo | osed of a | any estate for the purpose of  | f evading the  | laws relating to the    |
| Owner's Signature   |              |                     |            |  |                         |           | Dated                          |                |                         |
| X   |              | Prin <sup>4</sup>   | owner's    | s name if signed by ag                         | jent                    |           |                                |                |                         |
| I DO HEREBY declare under oath  | that I hay   | ve been duly a      | ppointed   | d agent for the owner o                        |                         | bove an   | d that I have full authority a | nd knowledge   | sufficient to file a    |
| proper declaration for him in accord <b>Agent's</b>                       | dance wit    | th the provisio     | ns of §1   | 2-50 C.G.S.                                    |                         |           |                                |                |                         |
| Signature   |              |                     |            |  |                         |           | Dated                          |                |                         |
| Witness of agent's sworn to Subscribed and sworn to                       |              |                     |            |  |                         |           | Dated                          |                |                         |
|   |              | Assess              |            | aff member, Town Cleri<br>er of Superior Court | k, Justice of the Peace | e, Notary |                                |                |                         |
|   |              | or Com              | 1113310116 | i oi Superioi Court                            |                         |           |                                |                |                         |